## **CONTRACT ROUTING SHEET**

Date Prepared:	10/10/12	Need Dat	e: 10/17/12	n
PROCESSING D	EPARTMENT:	CONTRA	CTOR:	Do
Department:	Health & Human	Name:	CA Dept. of Community Service	ž &
	Services/CSD		Development	6
Dept. Contact:	Heather Longo	Address:	P.O. Box 1947	
Phone #:	X7373		Sacramento, CA 95812-1	947
Department	1 1 1 1 it	Phone:	916-576-7109	C
Head Signature:	and Clien		ü	COUNS
	Daniel Nielson, Director		0	SEL
CONTRACTING	DEPARTMENT: Health & Hu	ıman Services - (	CSD	
	Human Resources requirements		x No:	
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	SEL: (Must approve all contract Disapproved:	ts and MOU's)	-23-12 By: Lella. By:	
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Pleas	se contact Heather Longo for pi	ck-up. X7373	G. G.	O,
				12
OTHER ADDROV	AL: (Specify department(s) pa	uticinating or dire	othy affected by this contract	- V
Departments:	AL. (Openity department(s) pa	indicipating of dife	ony anected by this contract	).
Approved:	Disapproved:	Date:	By:	
Approved:	Disapproved:	Date:	By:	-12, NI
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